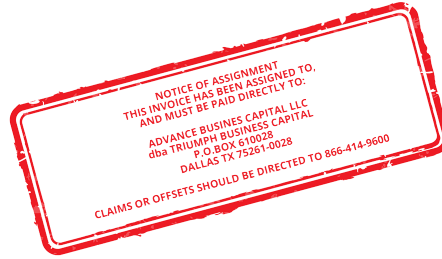




Vika Logistics Corp
c/o Triumph Buisness Capital LLC

P.O BOX 610028
Dallas, TX 75261-0028 USA
Tel: 866-368-2482



INVOICE

Invoice to
LEE - A , INC.
P.O. BOX 1505
CLYDE, TX, 79510

Invoice No : 10228
Invoice Date : 2017-02-15
Load# : 10541
Ship Date 2017-02-02
Delivery Date : 2017-02-06
W/O # Ref No. : se3345

LOAD DETAILS	QUANTITY	PICKUPDATE	WEIGHT
Shipper: sfr Type: Full Address: Reading, PA, United States Phone:	1	2017-02-02	40,000.00
Consignee: sdsd Type: Full Address: Richmond, CA, United States Phone:	1	2017-02-06	40,000.00

INVOICE AMOUNT	TOTAL \$3,750.00
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INTEGRATED
SUPPLY CHAIN SOLUTIONS

LOAD CONFIRMATION

LOAD NO.: 3439307**ALTERNATE LOAD ID:** 40018426**TERMS:** PP**MILEAGE:** 902.0 - RAND MCNALLY HHG ZIP TO ZIP VERSION 19**EQUIPMENT:** FLATBED**TARP TYPE:** 4 FT**COMMODITY:** COILS

COST: 1,650.00 (1,650.000 FLAT: ALL INCLUSIVE) FUEL: .00 TOTAL: 1,650.00

WEIGHTS AND MILEAGE ARE ESTIMATED THEREFORE COSTS AND RATES ARE ESTIMATES ONLY.

DATES AND TIMES WILL NOT REQUIRE THE MOTOR CARRIER TO VIOLATE HOURS OF SERVICE REGULATIONS (49 CFR PART 395).

ROUTING INFORMATION IS FOR INFORMATIONAL PURPOSES ONLY.

TO: INDIRA**FROM:** TOBY COX**CARRIER:** VIKA LOGISTICS CORP**COMPANY:** WORLDWIDE ISCS**PHONE:** 305-684-8457**PHONE:** 515-645-9437**FAX:****FAX:** 515-223-6455**EMAIL:** INDIRA@VIKALOGISTICSCORP.COM**EMAIL:** TCOX@WORLDWIDE-LOGISTICS.COM**REMIT TO:** WORLDWIDE ISCS

3611 109TH ST

URBAN DALE, IA 50322

PHONE: (877) 685-3737**FAX:** 515-645-9445**NOTES:** COILS:

4' TARPS, COIL RACKS / CHAINS, RUBBER COIL MTS, AND 4 X 4 BEVELED DUNNAGE REQUIRED.

1 COIL

DRIVER IS ALSO REQUIRED TO WEAR PERSONAL PROTECTIVE EQUIPMENT WHEN ON SITE.

NO PASSENGERS ALLOWED INSIDE OF FACILITY.

LOAD ID #: 40018426.

PICK UP APPOINTMENT IS ON 02/08 AT 5:00 PM. DRIVER MUST ARRIVE 15 MINUTES EARLY FOR APPOINTMENT.

DRIVER MUST REPORT TO DOOR: 9 FOR PICK UP

DELIVERY: AWAITING ON CALL BACK FROM CONSIGNEE FOR TIMES. (((I WILL ADVISE ON TIME)))

STOP 1 (PICKUP)

COMPANY: OUTOKUMPU STAINLESS USA

EARLIEST ARRIVAL: 02-08-17 00:01

1 STEEL DRIVE

ESTIMATED: 02-08-17 17:00

CALVERT, AL 36513

LATEST: 02-08-17 23:45

ORDER ID	ITEM	PRODUCT	PIECES	WEIGHT	DESCRIPTION
0901213101	40018426	COILS	1	46,121 LBS	CN REF: 679199; COILS
		TOTALS	1	46,121 LBS	

CHECK IN PROCEDURES: MUST CHECK IN AT FRONT GATE FOR LOADING PASS.

LOADING INSTRUCTIONS: NO CELL PHONE USE ALLOWED IN LOADING DOCK.

LOAD SPECIAL INSTRUCTIONS: *** TARP REQUIRED: 4 FT *** 24HR ADVNOTICE FOR APPOINTMENT: 216-292-3800 AND ASK FOR JOHN RUSSO, GREG FORBE S OR TERRY FOWLER RECEIVING:

MONDAY - FRIDAY; 7:00AM TO 3:30PMFULL TARP AND PPEO VERHEAD CRANE - SHEET LIFTER; FLATBED

STOP 2 (DELIVERY)

COMPANY: OLYMPIC STEEL, INC.

EARLIEST ARRIVAL: 02-10-17 07:00

5096 RICHMOND ROAD

ESTIMATED: 02-10-17 07:00

BEDFORD HEIGHTS, OH 44146

LATEST: 02-10-17 15:00

ORDER ID	ITEM	PRODUCT	PIECES	WEIGHT	DESCRIPTION
0901213101	40018426	COILS	1	46,121 LBS	CN REF: 679199; COILS
		TOTALS	1	46,121 LBS	

LOAD SPECIAL INSTRUCTIONS: *** TARP REQUIRED: 4 FT *** 24HR ADVNOTICE FOR APPOINTMENT: 216-292-3800 AND ASK FOR JOHN RUSSO, GREG FORBE S OR TERRY FOWLER RECEIVING:

MONDAY - FRIDAY; 7:00AM TO 3:30PMFULL TARP AND PPEO VERHEAD CRANE - SHEET LIFTER; FLATBED

Driver copy

Quick
FREIGHT MATTER

Dispatch Ph: 412-429-2182

Bill of Lading

Non-Negotiable

AFFIX PRO STICKER HERE

RECEIVED, subject to the "COMMON CARRIER RATE AGREEMENT" or the CONTRACT between the Shipper and Carrier in effect on the date of shipment; the property described below, in agreement with order, except as noted (contents and condition of packages unknown), marked, numbered, and described as shown below. This Bill of Lading is not subject to any tariff or disclaimations whether individually determined or filed with any federal or state regulatory agency, except as specifically agreed to in writing by the shipper and the carrier.

ORIGIN: Brentwood Industries 500 Spring Ridge Dr. READING, PA 19610 Hours: 8-2 Contact: Matt Phone: (610) 347-8549 Fax:		DEST: SAUSALITO-MARIN WTP/OVERSEA CONSTRUCTION 200 PARK BLVD RICHMOND, CA 94801 Hours: 8-3 Contact: receiving Phone: 510-234-0826 Fax:	
SEND KDL d/b/a Quick Freight Rates 800 N. Bell Ave. Bldg. 6, Suite 100 Carnegie, PA 15106		INVOICE TO Ship Date: 02-01-2017 BOL #: KTS5011309 / Load #: B200012214 PO #: SO #: Shipper's #: Carrier's #:	

Handling Unit	Pieces	HM	Description	NMFC#	Class	Weight
1 Truckload	1		Wastewater treatment equipment		50	30000 Lb
Totals:			1 Pieces in/on 1 Handling Units			30000

Subject to Section 7 of the Agreement between Shipper and Carrier, if the shipment is to be delivered to the consignee without recourse to the carrier, the originator shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all lawful charges. Brentwood Industries		C.O.D. AMOUNT \$ KARLIS C.O.D. amount in: CASH/RS C.O.D. FCC PAID BY: Shipper Consignee	
FORM OF PAYMENT Company Check Money Order Cashiers Check Other		2-6-17 16 pcs @ 8,925	

SHIPPER CERTIFICATION This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation. Date _____ Signature _____ Title _____ Shipper or Shipper's Agent Signature _____ Time & Date loaded: _____ AM/PM		CARRIER CERTIFICATION Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the Department of Transportation emergency response guidebook or equivalent document in the vehicle. Date _____ Signature _____ Title _____ Driver Load: Yes _____ No _____ Exemptions: _____ PIECES _____ Acquired in good order and condition, unless otherwise stated herein.	
PERMANENT ADDRESS: Time & Date loaded: _____ AM/PM Signature _____ Title _____ Shipper or Shipper's Agent Signature _____ Time & Date loaded: _____ AM/PM		VKA LOGISTICS CORP Signature _____ Title _____ Time & Date loaded: _____ AM/PM Driver Load: Yes _____ No _____ Exemptions: _____ PIECES _____ Acquired in good order and condition, unless otherwise stated herein.	

Driver copy



Dispatch Ph: 412-429-2102

Bill of Lading
Non-Negotiable

AFFIX PRO STICKER HERE

RECEIVED, subject to the COMMON CARRIER RATE AGREEMENT or the CONTRACT between the shipper and carrier in effect on the date of shipment, the property described below, in riparian good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as shown below. This Bill of Lading is not subject to any tariff or classifications whether individually determined or filed with any federal or state regulatory agency, except as specifically agreed to in writing by the shipper and the carrier.

ORIGIN: Brentwood Industries 500 Spring ridge dr. READING, PA 19610 Hours: 8-2 Contact: Matt Phone: (610) 347-8549 Fax: Apt #:		DEST: SAUSALITO-MARIN WTP/OVERAA CONSTRUCTION 200 PARK BLVD RICHMOND, CA 94801 Hours: 8-3 Contact: receiving Phone: 510-234-0928 Fax: Apt #:	
SEND KDL d/b/a Quick Freight Rates 800 N. Bell Ave. Bldg. 6, Suite 100 Carnegie, PA 15106		SHIP DATE: 02-01-2017 BOL #: KTS5011309 / Load #: B200012214 PO #: SO #: Shipper's #: Carrier's #:	

Handling Units	Pieces	HM	Description	NMFC#	Class	Weight
1 Truckload	1		Wastewater treatment equipment		50	30000 LB
Totals:				1 Pieces in/on 1 Handling Units		

FORM OF PAYMENT Shipper: _____ Company Check Money Order Cashiers Check Other: _____		C.O.D. AMOUNT \$ Remit C.O.D. amount to: CARRIERS C.O.D. FREE PAID BY: Shipper: _____ Consignment: _____	
Freight Charges Third Party		30000	

DPJ
2-6-17
16 ps @ 8,925

SHIPPER CERTIFICATION This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation. Date: _____ Signature: _____		CARRIER CERTIFICATION Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the Department of Transportation emergency response guidebook or equivalent located in the vehicle. Date: _____ Signature: _____	
PERMANENT ADDRESS: Time & Date Indored: _____ per: _____ (Shipper or Shipper's Agent Signature)		VIKA LOGISTICS CORP per: _____ Time & Date Indored: _____ (Driver's Signature)	
EXCEPTIONS: PICLS: _____ Accepted in good order and condition, unless otherwise noted herein.		EXCEPTIONS: PICLS: _____ Accepted in good order and condition, unless otherwise noted herein.	